

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|-------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>LM</i> | <i>32</i> | <i>01/18</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | <i>M.A.</i> | <i>1102</i> | <i>08/03/01</i> |
| | <i>A.T.</i> | <i>1071</i> | <i>01/16/02</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

301
08/03/01
523
01/17/01